

## SAMPLE FOR SINGLE PILOT OPERATIONS

**This is intended for VFR Operators that do not have an FAA Approved training program.**

Name : \_\_\_\_\_  
(first) (full middle name) (last)

Address : \_\_\_\_\_

City: \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Person to notify in case of emergency \_\_\_\_\_

Telephone Number \_\_\_\_\_

City: \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Pilot Certificate Type : \_\_\_\_\_ Number: \_\_\_\_\_

Ratings:      ASEL      AMEL      ASES      AMES      Rotorcraft

Instrument Airplane      Instrument Helicopter

Type of other ratings \_\_\_\_\_

Limitations on pilot certificate \_\_\_\_\_

Aeronautical experience (PIC MIN REQ VFR)

Total flight time as pilot      \_\_\_\_\_      \_\_\_\_\_      \_\_\_\_\_  
500      100      25

For record of current FAR 135.293 and 135.299 check refer to FAA Form 8410-3

Current duties and date of assignment      Isolated areas only \_\_\_\_\_

Date Assigned	PIC/SIC	Category & Class	Type Aircraft	Day	Night

MEDICAL Certificate :

Date:	Class:	Limitations:
Date:	Class:	Limitations:
Date:	Class:	Limitations:
Date:	Class:	Limitations:
Date:	Class:	Limitations:

Hazardous Materials Training 135.333(a)	Initial Date	Recurrent Date	Recurrent Date	Recurrent Date
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Relieved of duty (reason)

\_\_\_\_\_

## SAMPLE FOR BASIC OPERATIONS

Current duties and date of assignment to those duties:

Pilot-in-command \_\_\_\_\_ ASEL \_\_\_\_\_ ASES \_\_\_\_\_ AMEL \_\_\_\_\_ AMES \_\_\_\_\_

On-demand charter \_\_\_\_\_ Commuter \_\_\_\_\_

VFR \_\_\_\_\_ IFR \_\_\_\_\_ Day \_\_\_\_\_ Night \_\_\_\_\_ Passenger \_\_\_\_\_ argo \_\_\_\_\_

Passenger aircraft (9 or less) \_\_\_\_\_ Passenger aircraft (10 or 19 passenger) \_\_\_\_\_

List of all other assigned duties (by company)

1.
2.
3.
4.
5.

Medical Certificate:

Date	Class	Limitations

Type of and current assignment to each aircraft:

Original date of assignment	Category and class	Make & Model	Date of 135.293(a) competency	Route 135.299	

Date of proficiency 135.297	Date of auto pilot 135.105	Date if completion of commuter Operating experience in Make/model aircraft 135.244	

Record of pilot time including duty time, total flight time, night flight time, night landings, instrument flight time, number of Instrument approaches are undated in this pilot's record the beginning of each month, The monthly record is a part of this record.

Check Airman Authorizations:

Letter of Authorizations must be included as part of this airman's pilots record.  
Record of awards, disqualifications, corrective actions:

Relieved of duty (reasons)

Initial Training 135.343	Initial Date	Recurrent Date	Recurrent Date	Recurrent Date
135.329(a)(1)				
Hazardous Materials Training 135.333(a)	Initial Date	Recurrent Date	Recurrent Date	Recurrent Date
Initial Emergency Training 135.339(a)(b)		Date Passenger/Cargo A/C Type-Model Configuration		
Check Airman/Instructor Ground Training 135.339(a)(b)	Date	Emergency Training Completed in Additional Aircraft before pilot was assigned 135.331(a).		
Check Airman/Instructor Ground Training 135.339 ( c )	Date	Date _____ _____	A/C Type – Model _____ _____	Pax/Cargo _____ _____

Other training 135.347, Initial, transition, upgrade, & differences flight training:

Date	Type specify